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APPLICATION NO.	FILING DATE	FIRST NAMED IN	VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/843,622	04/26/2001	John S. Pete	ersen	2790.1001-001	7679	
TITLE OF INVENTION: I	METHOD FOR PHASE SHIF	T MASK DESIGN, FABRICATIO	N, AND USE			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330	\$300	\$1630	05/24/2004	
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
SAGAR, KRIPA		1756	430-005000			
CFR 1.363). Change of correspond Address form PTO/SB/ "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN PLEASE NOTE: Unlessen previously submitt (A) NAME OF ASSIGN Petersen A Please check the appropriate.	tion (or "Fee Address" Indicat or more recent) attached. Use D RESIDENCE DATA TO Bi s an assignee is identified bel ed to the USPTO or is being s NEE dvanced Lithogra	names of up agents OR, a firm (having agent) and the attorneys or a will be printed on the pater (B) RESIDENCE: aphy, Inc. names of up agents OR, a firm (having agent) and the attorneys or a will be printed will be printed outperformed by the printed of the pater of the pater (B) RESIDENCE: aphy, Inc.	rint or type) n the patent. Inclusion of a apletion of this form is NO CITY and STATE OR CO Austin, TX nt); individual 25 of (s):	ttorneys or of a single attorney or 2 ered patent d, no name 3 ssignee data is only appropria a substitute for filing an assi UNTRY)		
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